PTO/SB/21 (07-09)
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			Application Number	10/541,68	10/541,685		
TRANSMITTAL			Filing Date	12/16/200	12/16/2005		
FORM			First Named Inventor	Mouchara	Moucharafieh, N.		
			Art Unit	3771	3771		
(to be used for all correspondence after initial filing)			Examiner Name	Sullivan, t	Sullivan, Danielle D.		
Total Number of Pages in This Submission 44		Attorney Docket Number	13892US	13892US			
ENCLOSURES (Check all that apply)							
Fee Tran	nsmittal Form		Orawing(s)		Ш	After Allowance Communication to TC	
	ee Attached] ı	icensing-related Papers			Appeal Communication to Board of Appeals and Interferences	
Amendm	nent/Reply [] F	Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)	
	After Final		Petition to Convert to a Provisional Application			Proprietary Information	
	Affidavits/declaration(s)	一 F	Power of Attorney, Revocati		П	Status Letter	
177	l r		Change of Correspondence Ferminal Disclaimer	Address		Other Enclosure(s) (please Identify	
	n of Time Request	_			الثا	below):	
Express Abandonment Request Request for Refund							
Information Disclosure Statement CD, Number of CD(s)							
Landscape Table on CD							
Certified Copy of Priority Remarks Document(s)			his contrate and contrate of				
1. RCE Form PTO/SB/30 2. Information Disclosure Statement Form PTO/SB/08a							
Incomplete Application 3. Credit Card Form Reply to Missing Parts							
	nder 37 CFR 1.52 or 1.53						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm Name							
Signature Patricio a. Comm							
Printed name	Patricia A. Coburn						
Date	01/17/2010			Reg. No.	28594		
CERTIFICATE OF TRANSMISSION/MAILING							
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:							
Signature Judy Flodnan							
Typed or printed i	Typed or printed name JUDY READMAN Date 1-18-2010						